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0010/PTO
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Patent and Trademark Office**DECLARATION FOR
UTILITY OR DESIGN
PATENT APPLICATION**☐ Declaration
Submitted
with Initial Filing

OR

☒ Declaration
Submitted after
Initial FilingAttorney Docket
Number

H 5341 PCT/US

First Named
Inventor

Hoffmann et al.

COMPLETE IF KNOWN

Application Number

Filing Date

Group Art Unit

Examiner Name

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

REACTIVE HOT MELT ADHESIVE

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY)

as United States Application Number or PCT International

Application Number

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37 Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code §119(a)-(d) or §365(b) of any foreign application(s) for patent or inventor's certificate, or §365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority		Certified Copy Attached?	
			Not Claimed		YES	NO
101 49 142.5	Germany	10/05/2001	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
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			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority sheet attached hereto:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority sheet attached hereto.

Burden Hour Statement: This form is estimated to take .4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington DC 20231.

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DECLARATION

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I hereby claim the benefit under Title 35, United States Code §120 of any United States application(s), or §365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of Title 35, United States Code §112.1 acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application Number	PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
	PCT/EP02/10804	09/26/2002	

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority sheet attached hereto.

As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Firm Name Customer Number or label

☒ List Attorney(s) and/or agent(s) name and registration number below:

Name	Registration Number	Name	Registration Number
Stephen D. Harper	33,243		
Glenn E. J. Murphy	33,539		
Steven C. Bauman	33,832		
Gregory M. Hill	31,369		
Mary K. Cameron	34,789		

☐ Additional attorney(s) and/or agent(s) named on a supplemental sheet attached hereto.

Please direct all correspondence to: ☒ Customer Number or label 00423 OR ☐ Fill in correspondence address below

Name

Address

Address

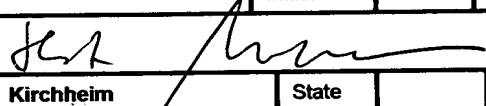
City State Zip

Country Telephone 610-278-4927 Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor: ☐ A petition has been filed for this unsigned inventor

Given Name	Horst	Middle Initial		Family Name	Hoffmann	Suffix e.g. Jr.	
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Inventor's Signature  Date 06.07.2004

Residence: City	Kirchheim	State		Country	Germany	Citizenship	Germany
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Post Office Address Im kleinen Feldle 17

Post Office Address


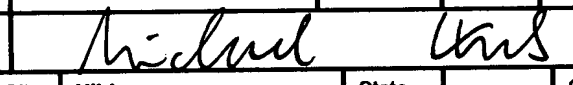
City	73467 Kirchheim	State		Zip		Country	Germany	Applicant Authority	
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☒ Additional inventors are being named on supplemental sheet(s) attached hereto

(+) inside this box +

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DECLARATION										ADDITIONAL INVENTOR(S) Supplemental Sheet													
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name		Uwe				Middle Initial				Family Name		Franken				Suffix e.g. Jr.							
Inventor's Signature										Date		07/12/2004											
Residence: City		Dormagen				State				Country		Germany				Citizenship		Germany					
Post Office Address		Haselnussweg 4																					
Post Office Address																							
City		41542 Dormagen				State				Zip				Country		Germany				Applicant Authority			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name		Michael				Middle Initial				Family Name		Krebs				Suffix e.g. Jr.							
Inventor's Signature										Date		07/12/2004											
Residence: City		Hilden				State				Country		Germany				Citizenship		Germany					
Post Office Address		Bogenstr. 1																					
Post Office Address																							
City		40724 Hilden				State				Zip				Country		Germany				Applicant Authority			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.							
Inventor's Signature										Date													
Residence: City						State				Country						Citizenship							
Post Office Address																							
Post Office Address																							
City						State				Zip				Country						Applicant Authority			
Name of Additional Joint Inventor, if any:										<input type="checkbox"/> A petition has been filed for this unsigned inventor													
Given Name						Middle Initial				Family Name						Suffix e.g. Jr.							
Inventor's Signature										Date													
Residence: City						State				Country						Citizenship							
Post Office Address																							
Post Office Address																							
City						State				Zip				Country						Applicant Authority			
<input type="checkbox"/>		Additional inventors are being named on supplemental sheet(s) attached hereto																					